



LOS ANGELES COUNTY COMMISSION ON HIV

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While not required of meeting participants, signing-in constitutes public notice of attendance. Presence at meetings is recorded solely based on sign-in sheets, and not signing-in constitutes absence for Commission members. Only members of the Commission on HIV are accorded voting privileges, thus Commissioners who have not signed in cannot vote. Sign-in sheets are available upon request.

COMMISSION ON HIV MEETING MINUTES December 11, 2008

**Approved
2/12/2009**

MEMBERS PRESENT	MEMBERS PRESENT, cont.	PUBLIC	OAPP/HIV EPI STAFF
Carla Bailey, <i>Co-Chair</i>	Robert Sotomayor	Marcus Aviles	Chi-Wai Au
Anthony Braswell, <i>Co-Chair</i>	Peg Taylor	Sergio Aviña	Kyle Baker
Al Ballesteros	Kathy Watt	David Crain	Maxine Franklin
Anthony Bongiorno		Marc Davis	Michael Green
Mario Chavez /Terry Goddard		Thanh Doan	Carlos Vega-Matos
Whitney Engeran-Cordova	MEMBERS ABSENT	Susan Forrest	Lanet Williams
Douglas Frye	Carrie Broadus	Alexander Ghaffari	Juhua Wu
Jeffrey Goodman	Robert Butler	Shawn Griffin	Dave Young
Joanne Granai	Eric Daar	Tracy Horn	
Michael Johnson	Nettie DeAugustine	Candace Ingram	
Lee Kochems	David Giugni	Miki Jackson	COMMISSION STAFF/CONSULTANTS
Brad Land	Richard Hamilton	Victor Martinez	
Ted Liso	Angélica Palmeros	Rich Mathias	Julie Cross
Anna Long	Chris Villa	Melissa Nuestro	Carolyn Echols-Watson
Manuel Negrete	Fariba Younai	Emily Oh	Dawn McClendon
Ruel Nolloedo		Jenny O'Malley	Jane Nachazel
Quentin O'Brien		Tania Rodriguez	Glenda Pinney
Everardo Orozco	SPN COORDINATORS	Cecilia Rosales	Doris Reed
Dean Page	<i>(Non-Commission Members)</i>	Julian Sanchez	James Stewart
Mario Pérez	Teresa Ayala-Castillo	Sharen White	Craig Vincent-Jones
Natalie Sanchez	Tamara Charles		Nicole Werner
James Skinner	Gabriela Leon		

1. **CALL TO ORDER:** Mr. Braswell called the meeting to order at 9:15 am.
 - A. **Roll Call (Present):** Ballesteros, Bongiorno, Braswell, Chavez, Frye, Goddard, Goodman, Granai, Johnson, Liso, Long, Negrete, Orozco, Page, Pérez, Sanchez, Skinner, Taylor, Watt
2. **APPROVAL OF AGENDA:**

MOTION #1: Approve the Agenda Order, as amended (*Passed by Consensus*).
3. **APPROVAL OF MEETING MINUTES:**

MOTION #2: Approve the minutes from the October 9, 2008 Commission on HIV meeting (*Passed by Consensus*).

MOTION #3: Approve the minutes from the November 13, 2008 Commission on HIV meeting (*Passed by Consensus*).
4. **CONSENT CALENDAR:**

MOTION #4: Approve the Consent Calendar, as presented (*Passed by Consensus*).

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- 5. PARLIAMENTARY TRAINING:** Mr. Stewart noted the 8:30 am parliamentary briefings had resumed. All were welcome.
- 6. PUBLIC COMMENT, NON-AGENDIZED:**
- Ms. Forrest reported the Department of Mental Health (DMH) had filled its HIV positions at Compton Family Mental Health Center, Hollywood Mental Health, and Long Beach Mental Health Services.
 - The statewide transgender HIV Equality and Parity Conference will be January 26th-28th, starting with dinner on “Challenges and Solutions in HIV Prevention and Care for Transgender Patients.”
 - Mr. Ghaffari was among 113 infected by a blood transfusion at Cedars-Sinai Hospital. He said that four have survived, and that nationwide there have been 12,000 such infections. Hemophiliacs had help with the 1999 Ricky Ray Act and \$100,000 per person settlement against pharmaceutical companies. The Steve Grissom Relief Fund failed in 2000 and transfusion victims were barred from suing blood banks by state blood shield laws. He asked for support to re-introduce the bill. Information is available at taintedtrust.com. Ms. Ingram, whose daughter was infected at Cedars-Sinai Hospital, also requested support for the bill. Mr. Braswell referred the issue to the Joint Public Policy Committee agenda.
- 7. COMMISSION COMMENT, NON-AGENDIZED:** There were no comments.
- 8. PUBLIC/COMMISSION COMMENT FOLLOW-UP:** There were no items for follow.
- 9. CO-CHAIRS’ REPORT:**
- A. Co-Chair Election:** Mr. Stewart indicated that Mr. Braswell had been nominated; there were no other nominations.
MOTION #4A: Elect Anthony Braswell to the position of Commission on HIV Co-Chair (*Passed by Consensus*).
- B. Executive Committee At-Large Member Nominations:** Nominations for the At-Large seats were opened.
➡ Mr. Goodman nominated Richard Hamilton and James Skinner.
- C. Committee Co-Chair Nominations:** Committees were instructed to open Co-Chair nominations and elect their co-chairs if they have not already done so.
- D. Committee Work Plans:** Mr. Braswell reminded committees that their 2009 work plans are due by the next Commission meeting.
- 10. EXECUTIVE DIRECTOR’S REPORT:**
- A. Commission Packet Modifications:** Mr. Vincent-Jones said October meeting feedback had prompted a review of the Commission’s meeting packets, and that practices would be modified for both resources and efficiency. A memorandum detailed the proposed economies such as removing redundant documents and summarizing recurrent material was included. Documents like standards of care with no public comment will not be reprinted, but some will be at the resource table. Materials available in time will go up on the website the Monday prior to the Commission meeting. Mr. Vincent-Jones clarified that while efficiency of resources is important, it should not remove necessary decision-making tools or reduce transparency.
- 11. STATE OFFICE OF AIDS REPORT:**
- Ms. Taylor reported the Part B application for \$122 million which funds EIP, Case Management, ADAP, and the County would be submitted to HRSA in the next few weeks. HRSA has named Kern County an emerging community for this cycle.
 - The Statewide Coordinated Statement of Need (SCSN), based largely on EMA/TGA needs assessments, will go to HRSA in February. Grantees and planning councils will be able to review it before then. The Part B Comprehensive Plan will go out in March.
 - The current estimated budget deficit was \$14.6 billion through June, with the Governor’s proposal to address the increasing deficit expected January 1st. Meanwhile, state departments were receiving budget Requests for Information. OA has no uncommitted funds.
 - The main focus for the California HIV Planning Group (CHPG) in 2009 is on improving responsiveness, effectiveness, and interaction with local community planning groups.
 - Staffing Update: Michael Foster, African-American consultant, has joined OA. Dr. Juan Ruiz, Chief, Epidemiology Branch, has moved to Infectious Disease, but will still do some HIV work. Michelle Roland, Chief, Office of AIDS, is available to attend Commission meetings.

12. OFFICE OF AIDS PROGRAMS AND POLICY REPORT:

- Mr. Pérez said early reports indicate a strong Part A application. However, prevention funds were cut by nearly \$400,000. Contracts have been adjusted after accessing alternative funding sources. Providers were notified of adjustments in the last week or so.
- Recommendations for the medical outpatient (MO) rate study have gone to Public Health (DPH) and the Board with an update. A January meeting is planned with MO partners, to address, among other issues, financing MO services.
- OAPP has hosted meetings with oral health and MAI providers. Meetings are designed to better evaluate sustainable capacity so as to continue to ramp it up.
- Mr. Pérez also noted that OAPP will be making recommendations to the Commission to adjust MAI allocations as they are underspent in the second year of the three-year cycle.
- Year 19 allocations are being finalized in light of Commission priorities, system changes, available NCC funds, and resources from other funding streams. Notices will go out to providers in approximately a month.
- ➔ Mr. Land asked for a report on the potential changes to the Service Provider Networks (SPNs).

A. Contracting Process:

- The contracting process can take up to 12 months and can be halted by DPH, County Counsel, County CEO, Auditor-Controller, Health Deputies, or the Board at various points. If halted, OAPP must redress concerns raised before the process can resume.
- The Board has authority to accept grant awards, but delegates it to OAPP for multi-year or recurrent awards if funding is within 25% of the prior year. OAPP sends a letter to the Board showing use of funds for the first; a notice of acceptance for the second.
- Solicitation documents must also be approved before Requests For Proposals (RFPs) are released. About a third is County template language, but most addresses needs of the service like the scopes of work and service descriptions. As RFPs cannot be written in 30 days, OAPP provides a timeline report if the Board makes such a request. Other solicitation processes, like Invitations to Bid, generally do not apply since OAPP is contracting services, not purchasing products.
- Proposers reply to RFPs in 30 to 60 days, but can request requirement review if they find qualifications inappropriate.
- To ensure fairness, proposer questions and responses collected in the RFP process are made an addendum to the RFP.
- Internal evaluations assure minimum qualifications while external panels score. It can be hard to recruit panels especially if there are many proposals like the 200 that were submitted in response to the Prevention RFP. Volunteers are needed and can serve by email.
- Once funding recommendations are made, DPH, Health Deputies and proposers are notified; appeals may also be made.
- OAPP sends negotiation letters to recommended contractors to initiate contract agreements. Once done, a Board package is developed with a Board Letter and the agreements. It goes first to DPH and then to the Board for approval.
- OAPP sends approved contracts for signature to providers and then to DPH. Contracts can be implemented once signed. Scope of Work changes can be negotiated if funding is stable. OAPP has delegated authority for funding changes within 15% or 25% (depending on contract), but must seek Board approval beyond that.
- Mr. Engeran-Cordova found the County process so cumbersome that he suggested that the Assessment of the Administrative Mechanism (AAM) should review other grant administration processes. It was noted Operations was assembling its own AAM RFP. Mr. Pérez cautioned that contracting out the procurement function could increase administrative expense, be subject to influence, and could take as long. He noted tension between speed and checks/balances. OAPP works on efficiency, e.g., with delegated authority and concurrent reviews.
- Dr. Green said the flowchart was recent and would be reviewed for potential efficiencies after AAM input.
- Ms. Granai said SPA 1 providers expressed concern at a consumer and an executive director forum about contracted services. A Commission-endorsed meeting with 30 consumers provided input as did a meeting of current providers, stakeholders, and the Health Officer on service mix, capacity, and client distribution. There was also a local needs assessment performed by OAPP. Mr. Pérez clarified a memo with a 2009 timeline for SPA 1 services RFP went to the Board.
- Mr. Land felt a work group parallel to the AAM would be faster. Mr. Vincent-Jones said AAM would be solicited soon, recommendations can be enacted as swiftly as the Commission chooses, and can be directed to specific areas. He added that addressing procurement activities outside of the AAM is beyond the purview of the Commission.
- Mr. Liso asked how ineffective contracts were rescinded. Dr. Green said another presentation would show the new performance-based monitoring system with indicators. All contracts may be cancelled with 30 days notice. Ms. Taylor noted the state also monitored funding. Ms. Watt added that ineffective agencies are, however, sometimes protected by politicians.

13. HIV EPIDEMIOLOGY PROGRAM REPORT:

- Dr. Frye said 13,300 non-AIDS name-based HIV cases had been reported since April 2006. There are over 23,000 PWA in the County including 4,000 new cases. The numbers indicate that, if the state permits, it might be to the County's advantage to use name-based data within the next year.
- A recent SB 699 stakeholders meeting discussed the scheduled transition to the relational database eHARS in the latter half of 2009. The state is concerned about shared case ownership, e.g., a person who tests HIV+ in one jurisdiction but is diagnosed with AIDS in another. The state will have the mother node while San Francisco and Los Angeles have secondary nodes. Los Angeles has requested tertiary nodes for Long Beach and Pasadena though it is rare for health jurisdictions to report to each other.
- HIV incidence reporting was also at issue as it requires more questions. A state emergency regulation is being prepared to add them to eHARS, but there are concerns with voluntary reporting from laboratories. Estimates are expected early in 2009 for 2007 and probably for 2008. Mr. Ballesteros wanted a geographic breakdown, but Dr. Frye said the system is not mature enough to provide that information yet. The Web Confidential Morbidity Report that will coordinate all disease reporting electronically was also discussed.
- The CDC revised STD/HIV guidelines for partner services, including flexible use of surveillance data from just matching cases to full accessibility for partner notifications. Dr. Frye has confidentiality concerns especially if data is accessed for multiple notifications. Mr. Engeran felt the CDC should view notification less as a health department function and more as part of integrated services. Mr. O'Brien noted issue sensitivity. Dr. Frye said he and Dr. Roland supported transparency, which indicates informing those tested of its possible uses.
- CD4 reporting is law. One large laboratory is reporting, but it is early to assess the effect. The state will be putting out a letter about it shortly. The County has also prepared a letter, but is holding it until it can be checked against the state's letter for consistency.
- The CDC revised the HIV disease case definition: Stage A, > 500; Stage B, 200-500; Stage C, < 200 or opportunistic infection. Dr. Frye said a key concern was that a temporary CD4 dip would result in permanent surveillance classification, but the CDC is more open to revisions than previously. Ms. Watt said supporting patients' improvements enhanced mental health. Mr. Ballesteros felt prevention messages are undercut with too much emphasis on recovery and too little on infection.
- HIV Epidemiology is participating in the three-year cycle of the National HIV Behavioral Surveillance (NHBS): MSM (second cycle now complete), IDU, and high-risk heterosexuals. The CDC also awarded a grant to HIV Epi for a transgender pilot that is part of the NHBS.
- Dr. Frye noted the state HIV Registry and Epidemiology has lost key personnel such as the Registry Coordinator, incidence staff, and Michael Donohue, IT, who transferred to Corrections. The County and San Francisco are helping as much as possible.
- ➡ Dr. Frye agreed to attend the Joint Public Policy (JPP) Committee meeting to discuss surveillance issues, including the partner counseling and notification proposals.
- ➡ Ms. Taylor agreed to report on the status of the state CD4 reporting letter.

14. PUBLIC HEALTH/HEALTH CARE AGENCY REPORTS: There were no reports.

15. PREVENTION PLANNING COMMITTEE (PPC) REPORT:

- Ms. Watt said the previous week's Annual Meeting discussed the Prevention Plan roll-out, the new RFP, and budget cuts. The 2009 6% cut is on top of 34% in the last eight years. As outgoing Community Co-Chair, she complimented members' dedication to the challenge. Two-year goals discussed included a transgender addendum for the Prevention Plan and greater focus on Native Americans. A think tank is also being planned that will include non-PPC stakeholders.
- Ms. Watt was elected UCHAPS Los Angeles Community Co-Chair with PPC support. AIDS Action is meeting with the administration's transition team on HIV/AIDS and the impact on it by drug and alcohol use.

16. SPA/DISTRICT REPORTS:

- **SPA #1:** Ms. Granai reported the unique priorities of SPA 1 and how to incorporate them in the priority- and allocation-setting process was discussed at the December 10th meeting and will continue in January. Anthem Blue Cross coordinated with APLA on December 8th to provide 13 general health screenings and 4 HIV tests. Walgreens began offering 10-pack needle purchase without prescription in Palmdale December 10th, with Lancaster to follow.
- **SPA #2:** Ms. Sanchez reported the December 18th meeting would feature a treatment update. There was a Seasons of Love-LA Holiday event with entertainment, a meal, and gift bags for over 240 families on December 7th. Seasons of Love-LA is a nonprofit started by SPA 2 providers that has expanded countywide.

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- **SPA #3:** Mr. Chavez said the November 20th meeting reflected interest in a presentation on SPA LACHNA participation. A November 18th Town Hall drew two consumers, indicating challenges to participation especially in the evening. The SPN is talking with Mr. Vincent-Jones on how to improve it for “Meet the Grantee.” The next SPN meeting will be December 18th.
- **SPA #4:** There was no report.
- **SPA #5:** Mr. Goodman reported that selection of the new SPN Coordinator would be finalized shortly.
- **SPA #6:** Ms. Charles said the Watts Healthcare CEO and Jasmine Burnett, Black AIDS Institute, presented on November 18th. CAB development continued with a recent CAB meeting. A consumer Holiday Party will replace the December meeting.
- **SPA #7:** Ms. Leon reported that STD/HIV Co-Morbidity training by the Whittier Health Center and a Hepatitis C update were featured at the last meeting. The next meeting will be January 22nd. A consumer-only Town Hall monitored by Ms. Leon will replace the December 19th meeting with 30 consumers RSVPd to date. Similar to a “Meet the Grantee,” it will look at service gaps, needs, and access.
- **SPA #8:** Ms. Ayala-Castillo reported there would be a joint meeting with the Meth Task Force that afternoon. SPN Coordinators are finalizing the February 20th CAB training. There will be presentations from the California STD Prevention Training Center and others from across the country. The SPN is also finishing deliverables for the contract year.

18. TASK FORCE REPORTS:

- A. **Commission Task Forces:** There were no reports.
- B. **Community Task Forces:** There were no reports.

19. BENEFITS REPORT:

- Ms. Cross noted the Governor is proposing more cuts like elimination of the Aged, Blind and Disabled Medi-Cal Program which waives share-of-cost up to a higher income level. Another proposal would cut about \$40 in supplemental state funds for SSI checks. Reductions are again proposed for services available at certain functional levels used to evaluate the need for In-Home Supportive Services. Medi-Cal optional benefits like dental care, optometry, and podiatry are also at risk.
- The 250% Return-to-Work Program is a pilot that has been extended indefinitely. Some who would be cut from the Aged, Blind, and Disabled Program could benefit, but education would be needed to help people determine its value for them.
- Ms. Cross will attend next week’s annual meeting of the Ryan White-funded HIV Health Access Work Group, previously the HIV Medicare/Medicaid Work Group. They focus on healthcare access policy and support ADAP counting towards TrOOP.
- ➔ The 10% Medi-Cal provider cut failed on appeal. Ms. Cross will update information next month and/or by policy brief.

A. Medicare Part D Open Enrollment:

- Ms. Cross said enrollment is open November 15th to December 31st. Medicare contracts annually with providers, so plans may change coverage, formularies, and/or out-of-pocket costs. A tool to compare plans is online at www.medicare.gov.
- OA sent an enrollment reminder packet to Medicare beneficiaries with ADAP in the past that included a premium payment subsidy program application. This year, the information went to ADAP enrollment workers instead. The application is on the OA website and in the Commission packet. Those with a premium requirement under Medicare Part D are eligible.

B. Medicare Part B Premiums:

- Ms. Cross said the state subsidy of Part B premiums (\$96.40/month) for those with Medi-Cal shares-of-cost over \$500 has been cut from Social Security benefit checks as of December.
- The updated policy brief in the packet reviews options, e.g., single people with income below \$1,170 are eligible for premium coverage with a Medicare Buy-In Program and the Medi-Cal Working Disabled Program may also be of help.
- There are challenges to OAPP paying premiums, e.g., California has been one of only two states to cover premiums in this income range leading federal and Medicare officials to question the need. Also, Ryan White funds cannot be paid directly to consumers. Ms. Cross is exploring other options with CMS.
- The state program is not yet approved, but \$1.6 million has been identified for re-allocation from another program. Mr. Pérez said OAPP is assessing the number at risk and how to best fill the gap until OA can develop a program. Mr. Goodman said Social Security is giving the largest COLA in years. That 5.83% will help mitigate the premium cut.

20. STANDING COMMITTEE REPORTS:

A. Priorities & Planning (P&P) Committee:

1. *Comprehensive Care Plan:*

- Mr. Goodman noted additional sections have been completed since the Annual Meeting, especially in epidemiology, needs analysis, and the continuum of care. There will be more work on the quality management section.

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- Mr. Vincent-Jones said revisions will be completed before January 5, 2009 due date. It is anticipated that the final plan will be opened for 30 days public comment the following month, then go out for publication and HRSA addendum if needed.

MOTION #5: Approve the Los Angeles County HIV/AIDS Comprehensive Care Plan 2009-2011, as presented, for submission to the Health Resources and Services Administration (HRSA) as required (*Passed as part of the Consent Calendar*).

2. **Medicare Part D Gap Assistance:**

- Mr. Goodman noted, while Ryan White funds could not be used, \$600,000 was shifted after receipt of the increased grant for use through December 31st. The Commission had voted to allocate any remaining funds to Medical Outpatient.
- Only five people have applied for program assistance, and only one was eligible. The Committee recommends not renewing now as it could drain funds while, evidently, many patients found other resources. Benefits Specialty will also receive \$700,000 to help people meet their needs.
- Mr. Orozco noted the “donut hole” has increased from \$4,050 to \$4,350 for this year. Mr. Vincent-Jones noted the new administration may support TrOOP which would allow ADAP to be counted towards share of cost.

B. Operations Committee: The Committee will be developing a comprehensive Commissioner training/development program.

1. **Member Nominations:** Mr. Johnson reported the nomination of Sergio Aviña and re-nomination of Mr. Orozco.

MOTION #6: Nominate Sergio Aviña to the SPA 4 provider representative seat and Everardo Orozco to the SPA 2 consumer representative seat and forward to the Board of Supervisors for appointment (*Passed as part of the Consent Calendar*).

2. **Consumer Caucus:**

- Mr. Johnson noted Mr. Pérez could not attend the Annual Meeting due to the CHPG. The Caucus thanked him for his leadership, and presented a plaque in appreciation for his “outstanding work and commitment to meeting the needs of those living with HIV and AIDS” on behalf of Los Angeles County HIV consumers.
- Due to SPA 3 distance challenges, “Meet the Grantee” meetings are may be held in both Pasadena and Pomona or at an alterative time. Mr. Land asked consumers to RSVP to Ms. Werner for all “Meet the Grantee” meetings to help plan support.
- Starting with this month’s meeting, the monthly Consumer Caucus meeting will begin follow the Commission meetings again.

C. Joint Public Policy (JPP) Committee:

1. **State Budget:** JPP has started a rapid response work group that will forward matters to Commissioners as needed.
2. **HIV/STD Control in the AFI:** The bill lacks an author, but coalitions continue to build around worker protection and public health implications. Mr. Engeran-Cordova noted legislative language is being reviewed. The PPC has been asked for feedback by December 15th.
3. **RW Reauthorization Strategies:** Mr. Vincent-Jones said the letter does not require approval, but it lends weight to the work. Mr. Pérez, Mr. Baker, and Ms. Bailey are all active in the effort.
MOTION #7: Approve the statewide Ryan White reauthorization strategy letter, as presented (*Passed as part of the Consent Calendar*).
4. **Public Policy Docket:**
 - Mr. Kochems noted the new state legislature has been seated and legislation must be introduced by February 28th. JPP’s annual review/prioritization will be March 4th, 2:00 to 5:00 pm or until all legislation related to HIV/AIDS is reviewed. JPP members will be assigned legislation to summarize. Contact Ms. Echols-Watson to join the email list.
 - The prevention/care funding process has been added to the work plan for multiple-level reauthorization-like review.
5. **Miscellaneous:** There was no additional discussion.

D. Standards of Care (SOC) Committee:

1. **ADAP Enrollment Standard of Care:**
MOTION #8: Approve the ADAP Enrollment standard of care, as presented (*Passed as part of the Consent Calendar*).
2. **Local Pharmacy Program/Drug Reimbursement (LPP/DR) Standard of Care:**
MOTION #9: Approve the Local Pharmacy Program/Drug Reimbursement (LPP/DR) standard of care, as presented (*Passed as part of the Consent Calendar*).
3. **Language Services Standard of Care:** Public comment has been extended one month for further review.
4. **Medical Outpatient/Specialty Standard of Care:** Public comment has been extended one month for further review.

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21. COMMISSION COMMENT:

- AHF won a lawsuit against the state to require compliance with AB 2197 that requires Medi-Cal enrollment of PWH without an AIDS diagnosis. AHF is working on recommendations for the order of judgment to ensure enactment despite the current budget constraints.
- He added AHF will see its 100,000th patient across 34 countries this month. With 1,000 partners, it planned 1 million HIV tests worldwide for World AIDS Day. Data so far indicate about 1.1 million tests completed with a seropositive rate of 7%.
- Mr. Nollo and Ms. Sanchez were thanked for their service to the Commission.

22. ANNOUNCEMENTS:

- Mr. Sotomayor reported SPA 1 was holding a GLBT Christmas party December 19th starting at 6:00 pm.
- Ms. Watt said volunteers will car pool to take clothes and hygiene kits to skid row on Christmas Eve. If interested, people can join the group at Van Ness Recovery House at 6:00 pm. Christmas Day there will be an open house from 1:00 to 5:00 pm.
- Club Freedom, the alcohol and drug free New Year's Eve dance, will be at The Village at McCadden, 8:00 pm to 1:00 am.

23. ADJOURNMENT: The meeting was adjourned at 1:20 pm in memory of Chloe, Mr. Goodman's canine companion and caregiver for 16 years.

A. Roll Call (Present): Bailey, Ballesteros, Bongiorno, Braswell, Chavez, Engeran-Cordova, Goodman, Granai, Johnson, Kochems, Land, Liso, Long, Nollo, O'Brien, Orozco, Page, Pérez, Sanchez, Sotomayor, Taylor, Watt.

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MOTION AND VOTING SUMMARY		
MOTION #1: Approve the Agenda Order.	<i>Passed by Consensus</i>	MOTION PASSED
MOTION #2: Approve the minutes from the October 9, 2008 Commission on HIV meeting.	<i>Passed by Consensus</i>	MOTION PASSED
MOTION #3: Approve the minutes from the November 13, 2008 Commission on HIV meeting.	<i>Passed by Consensus</i>	MOTION PASSED
MOTION #4: Approve the Consent Calendar, as presented.	<i>Passed by Consensus</i>	MOTION PASSED
MOTION #4A: Elect Anthony Braswell to the position of Commission on HIV Co-Chair.	<i>Passed by Consensus</i>	MOTION PASSED
MOTION #5: Approve the Los Angeles County HIV/AIDS Comprehensive Care Plan 2009-2011, as presented, for submission to the Health Resources and Services Administration (HRSA) as required.	<i>Passed as part of the Consent Calendar</i>	MOTION PASSED
MOTION #6: Nominate Sergio Aviña to the SPA 4 provider representative seat and Everardo Orozco to the SPA 2 consumer representative seat and forward to the Board of Supervisors for appointment.	<i>Passed as part of the Consent Calendar</i>	MOTION PASSED
MOTION #7: Approve the statewide Ryan White reauthorization strategy letter, as presented.	<i>Passed as part of the Consent Calendar</i>	MOTION PASSED
MOTION #8: Approve the ADAP Enrollment standard of care, as presented.	<i>Passed as part of the Consent Calendar</i>	MOTION PASSED
MOTION #9: Approve the Local Pharmacy Program/Drug Reimbursement (LPP/DR) standard of care, as presented.	<i>Passed as part of the Consent Calendar</i>	MOTION PASSED